Public Service Commission of South Carolina 101 Executive Center Dr., Suite 100 Columbia, SC, 29210



Phone: 803-896-5100 Fax: 803-896-5199

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					Email f	orm to: conta	act@psc.sc.gov
* Required Fields			Letter of Pr	otest		Print	Email-
Date: * /0-27_	12	in Docket	8012 -	<u> ۱۷۷ - ۷</u>	IJ		
Protestant Informati	on.						

					그리는 열등 경험을 가장하는 일 학생들은 다음을 다 같다.		
Protestant Inform	nation:		T# 32 1 22 1 22 1	3		¥ 14 1 + ¥ 1 1	
Name *	JAGADI	SH BHU	PATHI				
Mailing Address *	3077	AMARAN	TH 5	RIVE			
City, State Zip *	TEGA C	AY	Sc	29	708 Phone * 900	4-COB-105	7
E-mail	JAGADISH. BHUPATHI @			Gm. Gm			

1. What is your connection or interest in this case? * For example, are you a customer of the Company that is the subject of this pending proceeding? (This section must be completed. Attach additional information if necessary.)

CUSTOMER

2. Please give a concise statement of your protest. * (This section must be completed. Attach additional information if necessary.)

Why would TCWS be intitled to another increased. Dewage spells neumerous over the years - no improvements have been made -

3. Do you wish to make an appearance at a hearing in this proceeding , if scheduled, and offer sworn testimony? *

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